a	
Ø	
σ	
N	Please type a plus sign (+) inside this
C	, , , , , , , , , , , , , , , , , , , ,
•	
Ø	Under the Paperwork Reduction Act of
•	

PTO/SB/05 (11-00)

Approved for use through 10/31/2002. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION **TRANSMITTAL**

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attorney	/ Docket No.	SHC0146					
First In	First Inventor SATORU TANGE						
Title	PROCE	SS FOR MANUFACTURING ELASTICALLY					
Express Mail Label No. F1 73128305011S							

APPLICATION ELEMENTS					ADDRES	S TO		t Commissioner for Patents ent Application	7 U		
See MPEP chapter 600 concerning utility patent application contents.								ton, D.C. 20231			
1. [ee Transmittal Form (e.g., P Submit an original, and a duplicate		ssing)	7.		Compu	ter Progi	ram <i>(Ap)</i>		j10.
2.		applicant claims small entity s see 37 CFR 1.27.	tatus.		8.	Nucle (if app	otide and licable, all	l/or Amir necessary	no Acid (y)	Sequence Submission	
з. [specification preferred arrangement set forth be	[Total Pages	17]		a.		Compute	r Reada	ble Form (CRF)	
		Descriptive title of the inventi				b.	Specific	cation Se	equence	Listing on:	
	-	Cross Reference to Related	Applications				i. [CD-F	ROM or	CD-R (2 copies); or	
		Statement Regarding Fed sp Reference to sequence listing		i D			ii. 🗀	pape	er		
		or a computer program listing				_		`tataman	da varifi	ring identity of above cop	ioo
	-	Background of the Invention			()	C.			-	and the second s	470 - 414 - 4 1 - 384 - 8 1 - 4 - 47
	-	Brief Summary of the Inventi Brief Description of the Draw	on inas <i>(if filed</i>)			AC	COMP	ANYIN	IG APF	PLICATION PARTS	ne speeken ek e
	-	Detailed Description			9.		Assignm	nent Pap	ers (cov	er sheet & document(s))	ļ
		Claim(s) Abstract of the Disclosure			10.			3.73(b) sere is an a		ent Power of Atto	orney
_					11.		English	Translati	ion Docı	ument (if applicable)	
4	√ □	Orawing(s) (35 U.S.C. 113)	[Total Sheets	2]	12.	7		ion Disc		Copies of IDS	S
5. C	Dath or	Declaration	[Total Pages	2 j	13.	\overline{J}		ary Ame			
Ž	a.	Newly executed (original	inal or copy)			岃		•		(MPEP 503)	
	I	Copy from a prior app			14.		(Should b	e specific	ally itemiz	zed)	
	b.	(for continuation/division	al with Box 18	completed)	15.	\checkmark		priority is		Document(s)	
		i. DELETION OF			. 16.					n under 35 U.S.C. 122	135
The second		Signed statemer named in the pri)			uivalent.		ust attach form PTO/SB/	33
_		1.63(d)(2) and 1									
6.		Application Data Sheet. See			17.	Ш	Other:			· · · · · · · · · · · · · · · · · · ·	
18. or in a	If a C an Appli	ONTINUING APPLICATION, cation Data Sheet under 37 CFR	check approp 1.76:	riate box, and s	upply th	e requi	site intorm	ation belo	w and in a	a preliminary amenament,	
9		ontinuation Divisional		nuation-in-par	rt (CIP)	of p	rior appli	cation N	o.:	1	
į		application information: Exam	niner					Group / An	t Unit		
For	CONTIN	HATION OF DIVISIONAL APPS	only The e	ntire disclosu	re of th	prior	annlicatio	on from	which ar	n oath or declaration is su	upplied
unde	er Box 5 rence. T	bb, is considered a part of the che incorporation can only be rel	disclosure of lied upon whe	the accompar n a portion ha	nying co s been	inadve	rtently om	itted fron	n the sub	mitted application parts.	iteu by
				ORRESPO							
		N than an Ban Onda I abal		0003				or [respondence address below	
X	Custo	mer Number or Bar Code Label 00832			_					espondence address below	
			(Insert Custo	omer No. or Atta	ach bar	code la	bel here)	_			
Naı	ma	Baker & Daniels									
IVai											
Address		111 East Wayne Street, Suit	te 800								
700	11000										
City	/	Fort Wayne		State	IN			Zip	Code	46802	
Col	untry	USA		Telephone	219-4	24-800	0		Fax	219-460-1700	
	Name (Print/Type) Michael S. Gzybowski Registration No. (Attorney/Agent) 32,816										
	Signa	004 1 0		29 /		H			Date	August 31, 2001	7
,	w Siulia	LUIG (/ ////// CO) V	V MM233	V 2						1	Al

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.



PTO/SB/17 (11-00)
Approved for use through 10/31/2002. OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE
Under the Paperwork Reduction Act of 1995, no persons are required to r espond to a collection of information unless it displays a valid OMB control number.

FEE TRANSMI	ΤΤΔΙ	Complete if Known					
for FY 200		Application Number					
101 F 1 200	B '	Filing Date					
		First Named Inventor	Satoru Tange				
Patent fees are subject to annual revi	ision.	Examiner Name					
		Group Art Unit					
TOTAL AMOUNT OF PAYMENT	\$710.00	Attorney Docket No.	SHC0146				

METHOD OF PAYMENT				FEE CALCULATION (continued)						
1. 🖾 indicat	ommissioner is hereby aut led fees and credit any over		3. ADDITIONAL FEES Large Entity Small Entity							
Deposit Account	02-0385		Fee Code	Fee (\$)	Fee Code	Fee (\$)	Fee	Description	on	Fee Paid
Number			105	130	205	65	Surcharge - late	-		
Deposit Account Name	BAKER & DA	NIELS	127	50	227	25	Surcharge - late sheet	provisional	filing fee or cover	
Charge	Any Additional Fee Required		139	130	139	130	Non - English s	pecification		
Under 3	37 CFR §§ 1.16 and 1.17		147	2,520				•	arte reexamination	
See 37	nt claims small entity status. CFR § 1.27		112	920*			action		IR prior to Examiner	
2. 🔀 Paym	ent Enclosed:		113	1,840*	113	1,840*	Requesting pub action	lication of S	IR after Examiner	
Check	Credit card	Money Order Other	115	110	215		Extension for re			
	FEE CALCULATIO	N	116	390	216		Extension for re			
1. BASIC F	ILING FEE		117	890	217		Extension for re			
Large Entity S	Small Entity		118	1,390	218		Extension for re			
Fee Fee Fe Code (\$) Co		n Fee Paid	128	1,890	228		Extension for re	• •	th month	
	1 355 Utility filing fee	710.00	119	310	219		Notice of Appea			
106 320 20	6 160 Design filing fee		120	310	220		Filing a brief in s	• •	n appeal	
107 490 20	7 245 Plant filing fee		121	270	221		Request for oral	=		
108 710 20	8 355 Reissue filing fee		138	1,510	138	1,510	Petition to institu	•	, -	
114 150 21	4 75 Provisional filing	fee	140	110	240	55	Petition to revive			
	SUBTOTAL (1)	\$710.00	141	1,240	241				onal	
2 EYTPA C	LAIM FEES		142	1,240	242	620	Utility issue fee			
Z. EXTINA C	I	Fee from	143	440	243	220	Design issue fe	е		
Total Claims	Extra Claims 6 -20** = 0 X	below Fee Paid = 0.00	144	600	244		Plant issue fee			
Independent	1 - 3** = 0 X	= 0.00	122	130	122	130	Petitions to the			
Claims Multiple Dependen	it [=	123	50	123		Processing fee			
Large Entity S			126	180	126	180	Submission of In Statement	ntormation i	Disclosure	
Fee Fee Fe Code (\$) Co		cription	581	40	581	40	Recording each (times number of	patent assi of properties	gnment per property	
103 18 20			146	710	246	355	Filing a submiss (37 CFR § 1.12		al rejection	
102 80 203 104 270 204	•	aims in excess of 3 dent claim, if not paid	149	710	249	355	For each addition	nal inventio	n to be examined	
109 80 20	• • • • • • • • • • • • • • • • • • • •	pendent claims	179	710	279	355	(37 CFR § 1.1) Request for Cor		mination (RCE)	
.55 55 20.	over original p		169	900	169		Request for exp	edited exan		
110 18 21	0 9 ** Reissue clair and over orig	ms in excess of 20 inal patent	Oth	er fee (specify))	of a design appl	lication		
	SUBTOTAL (2)	\$0.00		,						
**or number previously paid, if greater; For Reissues, see above				uced b	y Basic	Filing	Fee Paid	SUBTO	TAL (3)	
SUBMITTED B	Y							Complete (f applicable)	
Name (Print/Type)		S. Gzybowski		Registra Attorney	ation No //Agent)	D	32,816	Telephone	219-424-8	000
Signature	Michael	5 Quehon -					-	Date	August 31, 20	001

WARNING: Information of this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

, <u>, , , , , , , , , , , , , , , , , , </u>								
CERTIFICATE OF MAILING BY "EXPRESS MAIL" (37 CFR 1.10) Docket No.								
Applicant(s): Satoru Ta	SHC0146							
Serial No.	Filing Date	Examiner	Group Art Unit					
Invention: PROCESS F COMPOSIT	OR MANUFACTURING ELAST E SHEET	ICALLY STRETCHABLE AN	D CONTRACTIBLE					
I hereby certify that the	e following correspondence:							
	(Identify type	of correspondence)						
is being deposited with	h the United States Postal Servi		o Addressee" service under					
AUGUST (Date) (Date)		MICHELLE L (Typed or Printed Name of Person Mailing (Signature of Person Mailing EL731283 ("Express Mail" Mailing	NEAL Mailing Correspondence) g Correspondence) 059					
	Note: Each paper must ha	ve its own certificate of mailing.						

P06A/REV02